Docket No.: 115018

APPLICATION FOR UNITED STATES PATENT **DECLARATION AND POWER OF ATTORNEY**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; that

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: RAILWAY TRUCK SUSPENSION DESIGN

described and claim	ned in the specification:			
Check one				
*a. 🗵	attached hereto.			
b. 🗌	filed on as Appli	ication No and amen	ded on (if applicable).	
f bb		nd and understand the contr	ents of the above-identified specificati	on including the claims as
	nendment referred to above		chis of the above-identified specificati	on, mending the claims, as
aniended by any an	dedge the duty to disclose	to the Office all information	n known to me to be material to patent	ability as defined in Title 37,
Code of Federal Re				
		the priority benefits of the	following foreign application(s) and/	or United States provisional
application(s) filed	by me or my legal repres	sentatives or assigns within	one year prior to this application are h	ereby claimed:
application(s) mea				
IIC Provisional Pa	stent Application No. 60/	482,133 filed June 25, 2003		
U.S. Provisional Fa	itelit Application 140. 00/	402,133 Inca June 23, 2003		
771 C 11-	······································	matant ar invantaria partific	ate on this invention were filed in cou	intries foreign to the United
The follo	owing application(s) for	patent or inventor's certification	n, or (b) before the filing date of the a	hove-named foreign priority
States of America	or United States provision	year prior to uns application	ii, or (b) before the ming date of the a	bove manes foreign priority
application(s) and	of Officer States provision	iai application(s).		
			M. C.N	to measure this
I hereby	appoint the following	as my attorneys of record	with full power of substitution and	revocation to prosecute uns
application and to t	ransact all business in the		D D	
			am P. Berridge, Reg. No. 30,024; omas J. Pardini, Reg. No. 30,411;	
			Robert A. Miller, Reg. No. 32,771;	
			; Stephen J. Roe, Reg. No. 34,463;	
			istopher W. Brown, Reg. No. 38,025;	
			Paul Tsou, Reg. No. 37,956; and	,
	Kithai u	Eric D. Morehouse,		
		2110 27 1.101 1110 110,		
ALL CORRESPO	ONDENCE IN CONNE	CTION WITH THIS AP	PLICATION SHOULD BE SENT T	TO OLIFF & BERRIDGE,
PLC, P.O. BOX 1	9928, ALEXANDRIA, `	VIRGINIA 22320, TELEP	HONE (703) 836-6400.	
I hereby	declare that I have review	wed and understand the con	tents of this Declaration, and that all s	tatements made herein of my
own knowledge ar	e true and that all statem	ents made on information a	and belief are believed to be true; and	further that these statements
were made with th	e knowledge that willful	false statements and the like	te so made are punishable by fine or i	mprisonment, or both, under
		es Code and that such willf	ul false statements may jeopardize the	validity of the application or
any patent issued the	hereon.	•		
		•		
Typewritten Fi		T. Line	I.	PERSHWITZ
of First or Sole	e Inventor	Julius Given Name	Middle Initial	Family Name
) **Inventor's Si	mature: L	elius I. Per	Shwitz	Talling Pearle
**Date of Sign		December 1		
		Month	Day	Year
Residence:	Gran	ntham	Pennsylvania	USA
11001001100.			State or Province	Country
Citizenship:	City United States of America		State of 110 vince	
Citizenanip.				
	Post Office Address: (Insert complete	P. O. Box 313		
	mailing address,			
	including country)	Grantham, Pennsylvania	17027. USA	
*If Box (a.) is che			to the specification (including claims)	•

PAGE 2 OF U.S.A. DECLARATION FORM (Discard this page in a sole inventor application)

1	Typewritten Full	Name				
of Second Joint Inventor (if any)		Thomas	R.	BERG	_	
			Given Name	Middle Initial	Family Name	٠
2 **Inventor's S			Theese 12	Distriction	00011	_
3	**Date of Signatu	ire:	VANUARY		2004	_
			Month O	Day	Year	
	Residence:	Warson V	Voods	Missouri	USA	·
	-	City	/	State or Province	Country	
	Citizenship:	United States of Americ	a ·			_
	-	Post Office Address: (Insert complete	1120 Dunwoody Driv	ve		_
		mailing address, including country)	Warson Woods, Miss	ouri 63122, USA		_
1	Typewritten Full	Name				
of T	hird Joint Inventor	(if any)				_
			Given Name	Middle Initial	Family Name	
2	**Inventor's Sign					_
3	**Date of Signati	ıre:			¥	_
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	Residence:					
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	out 1:	City			•	
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		mailing address, including country)				
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1	Typewritten Ful					
of I	Fourth Joint Invento	r (if any)	C' · N-···	Middle Initial	Family Name	_
			Given Name	Middle initial	rainly Name	
2	**Inventor's Sign					_
3	**Date of Signat	ure:	N4	Day	Year	_
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	Residence:					
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	Citizenship:					
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		including country)				
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1	Typewritten Ful					
of I	Fifth Joint Inventor	(if any)	Given Name	Middle Initial	Family Name	
_	**** C:		Given Name	Wilder miliai	Taility I vanio	
2	**Inventor's Signate **Date of Signate					
3	Tale of Signal	.uie.	Month	Day	Year	
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	Residence:					<u> </u>
		Cit	у	State or Province	Country	
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	r	Post Office Address:				
		(Insert complete				
		mailing address,				
		including country)				

Note to Inventors: Please sign name exactly as it appears and insert the actual date of signing.

This form may be executed only when attached to the first page of the Declaration and Power of Attorney form of the application to which it pertains.